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MAR 30 2006

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/769,405
Filing Date	January 30, 2004
First Named Inventor	OVERALL, WILLIAM RYAN
Group Art Unit	3736
Examiner Name	Unassigned

Total Number of Pages in This Submission

Attorney Docket Number: **STAN-345**

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form

☒ USPTO Credit Card Form 2038

☒ Preliminary Amendment

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Documents

☐ Response to Missing Parts/ Incomplete Application

☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

☐ Assignment Papers *(for an Application)*

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s

☐ After Allowance Communication to Group

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to Group *(Appeal Notice, Brief, Reply Brief)*

☐ Proprietary Information

☐ Status Letter

☒ Return postcard

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent (Reg. No.)	CAROL M. LASALLE, 39,740 BOZICEVIC, FIELD & FRANCIS, LLP
Signature	
Date	March 30, 2006

EXPRESS MAIL LABEL NO. EV 687 637 086 US

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	Complete if Known	
Effective on 12/08/2004. **FEE TRANSMITTAL For FY 2005** Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	10/769,405
	Filing Date	**January 30, 2004**
	First Named Inventor	**OVERALL, WILLIAM RYAN**
	Examiner Name	**Unassigned**
☒ Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3736
TOTAL AMOUNT OF PAYMENT ($) 975.00	Attorney Docket No.	**STAN-345**

Stamp: OIPE MAR 30 2006 PATENT & TRADEMARK

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ **Credit Card** ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account   Deposit Account Number: **50-0815**   Deposit Account Name: **Bozicevic, Field and Francis LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) ☒ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES Fee ($)	Small Entity Fee ($)	SEARCH FEES Fee ($)	Small Entity Fee ($)	EXAMINATION FEES Fee ($)	Small Entity Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims		Extra Claims	Fee ($)		Fee Paid ($)
76	- 41 (HP) =	35	x 25.00	=	875.00

HP = highest number of total claims paid for, if greater than 20

Multiple Dependent Claims Fee ($)	Fee Paid ($)

Indep. Claims		Extra Claims	Fee ($)		Fee Paid ($)
4	(2 previously filed)	1	x 100	=	100.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).
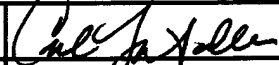
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

	Fee Paid ($)
Non-English Specification, $130 fee (no small entity discount)	
Other: _____	

SUBMITTED BY			
Signature	*[signature]*	Registration No. (Attorney/Agent) 39,740	Telephone **(650) 327-3400**
Name (Print/Type)	Carol M. LaSalle		Date 03/30/2006

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PRELIMINARY AMENDMENT UNDER 37 C.F.R. §1.115 Address to: Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket No.	STAN-345
	Confirmation No.	8227
	First Named Inventor	OVERALL, WILLIAM RYAN
	Application Number	10/769,405
	Filing Date	January 30, 2004
	Group Art Unit	3736
	Examiner Name	Unassigned
	Title: "DETECTION OF APEX MOTION FOR MONITORING CARDIAC DYSFUNCTION"	

Sir:

Prior to the examination of the above-referenced application on the merits, please enter the amendments below.